

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: FCL011223	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____		(X3) DATE SURVEY COMPLETED R 02/11/2015
NAME OF PROVIDER OR SUPPLIER EVERGREEN LIVING HOME #10			STREET ADDRESS, CITY, STATE, ZIP CODE 236 COUNTRY TIME CIRCLE LEICESTER, NC 28748		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE	
{C 000}	Initial Comments Report by Glenn Hoppin A Complaint Follow-up Survey was conducted on February 11, 2015 starting at 10:45AM and ending at 11:15AM. Not all of the previously cited deficiencies were corrected. Therefore, further action is required. The remaining deficiencies that were observed are as follows:	{C 000}	<p>CONSTRUCTION SECTION MAR 30 2015 RECEIVED</p> <p>3 door alarm provided 2/19/15</p>		
C 150	Outside Entrances/Exits-Wanderers, Alarms SECTION .0300 - THE BUILDING 10A NCAC 13G .0312 OUTSIDE ENTRANCE AND EXITS (g) In homes with at least one resident who is determined by a physician or is otherwise known to be disoriented or a wanderer, each exit door for resident use shall be equipped with a sounding device that is activated when the door is opened. The sound shall be of sufficient volume that it can be heard by staff. If a central system of remote sounding devices is provided, the control panel for the system shall be located in the bedroom of the person on call, the office area or in a location accessible only to staff authorized by the administrator to operate the control panel. This Rule is not met as evidenced by: The wander alarm in the facility is not working. A plan of protection is in place until the alarm is repaired. Have a qualified individual repair or replace the wander alarm.	C 150			
C 161	Housekeeping-Land Line Phone SECTION .0300 - THE BUILDING	C 161			

Division of Health Service Regulation

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

STATE FORM

6649

6R8D22

If continuation sheet 1 of 3

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C 161	Continued From page 1 10A NCAC 13G .0315 HOUSEKEEPING AND FURNISHINGS (a) Each family care home shall: (12) have at least one telephone that does not depend on electricity or cellular service to operate. (e) This Rule shall apply to new and existing homes. This Rule is not met as evidenced by: 1.) At the time of survey it was observed that there is no landline phone in the facility. Install a landline phone in the facility that does not depend on electrical or cellular service to operate.	C 161		
(C 170)	Fire Safety-Any Other City Ordinances SECTION .0300 - THE BUILDING 10A NCAC 13G .0316 FIRE SAFETY AND DISASTER PLAN (c) Any fire safety requirements required by city ordinances or county building inspectors shall be met. This Rule is not met as evidenced by: A joint fire drill was conducted with the Buncombe County Fire Marshals office, DSS, and the DHSR Construction Section. The live drill was conducted by the staff and 911 was called as part of the drill. The following conditions were observed 1.) During the drill the 911 dispatcher was unable to understand the staff member calling, because the staff member speaks only Korean. 2.) When the power was turned of to the facility the smoke detectors, the phones, and the wander	(C 170)	provided landline phone	3/20/15

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(C 170)	Continued From page 2 alarm did not function. Based on these facts the Buncombe County fire Marshall is requiring an addressable monitored fire alarm system that will tell emergency responders what the emergency is and where to respond. Obtain bids for a monitored addressable fire alarm system and provide the Buncombe County Fire Marshals office and the DHSR Construction section with a set of installation drawings for approval before installing the system. Provide the DHSR Construction section with copies of all permits, plans, invoices, and any other supporting documentation when the system is complete. Contact the Fire Marshals office and the DHSR Construction section for final approval after installation.	(C 170)	Commercial Fire alarm Company will submit the plan to the firemarshal & will be installed next week.	3/31/15



SCHEDULE OF PROTECTION

The ADT Authorized Dealer Program is an ADT LLC dba ADT Security Services ("ADT") approved Program of independent ADT Authorized Dealers. Please refer any questions concerning the Program or Dealer to ADT at 800-539-9890.

Monitoring Account Number: 4352167557
 Dealer Name: Protect Your Home
 Dealer Number: 6722252

Nick

TO: Glenn Hoppin

THIS CONTRACT is made and entered into this 14 day of February, 2015 by and between Dealer ("We" "Us" or "Our") and Glenn Lee ("You" or "Your").
7316 S. ... ("Monitored Location") 920-603-7738
 Street & Number, State, Zip Code Home Telephone Business Telephone

This Schedule of Protection is incorporated by reference into the Alarm Services Contract made this date between We, the Dealer and You, the terms and conditions of which fully apply to this Schedule of Protection.

<input checked="" type="checkbox"/> RESIDENTIAL	<input type="checkbox"/> COMMERCIAL	<input checked="" type="checkbox"/> WIRELESS	<input type="checkbox"/> APARTMENT
DESCRIPTION		Price	EXTENDED PRICE
Base System (\$850 Value)- SELECT ONLY ONE OF THE FOLLOWING			
<input type="checkbox"/> Impassa Base (1 Key, 2 D/W, 1 Motion)			
<input type="checkbox"/> Power Series (1884 Panel, 1 Keypad, 1 Keyfob)		\$ 99.00	99.00
WIRELESS <u>2</u> Door/Window <u>1</u> Motion <u>Keypad</u>			
PROMO ITEM		\$49	
		PRE INSTALL SUBTOTAL 99.00	
Pulse Select Wireless		\$199	
Pulse Select Hardwire (I-Hub, IT230)		\$299	
Pulse + Video Wireless (I-Hub, 1 Wireless Keypad, Cellular Unit, 1 Indoor Camera)		\$399	
Pulse + Video Hardwire (I-Hub, IT230, 1 Indoor Camera)		\$499	
Pulse + Home Control Wireless (I-Hub, 1 Wireless Keypad, Cellular Unit, 1 Door Lock, 1 Lamp/Appliance Control)		\$499	
Pulse + Home Control Hardwire (I-Hub, IT230, 1 Door Lock, 1 Lamp/Appliance Control)		\$599	
Pulse + Video & Home Control Wireless (I-Hub, 1 Wireless Keypad, Cellular Unit, 1 Indoor Camera, 1 Door Lock, 1 Lamp/Appliance Control)		\$599	
Pulse + Video & Home Control Hardwire (I-Hub, IT230, 1 Indoor Camera, 1 Door Lock, 1 Lamp/Appliance Control)		\$699	
		PULSE SUBTOTAL	
KIT ITEMS NOT USED		Keychain Remote(\$129) Door/Window(\$129) Motion Detector(\$229)	

Additional Protection Devices							
QTY	Equipment	Price	Total Price	QTY	Equipment	Price	Total Price
1	Integrated Cellular Unit	\$99 ea.	99.00		Indoor Camera	\$229 ea.	
	Cellular Unit 3G 2075 3G 3070 TG-4 (circle one)	\$99 ea.			Outdoor Camera	\$289 ea.	
1	Wireless Door/Window Sensor	\$129 ea.	129.00		Wi-Fi Repeater	\$169 ea.	
	Keychain Remote (w/Personal Panic)	\$129 ea.			Ethernet Switch	\$49 ea.	
	2-Way Keychain Remote	\$149 ea.			8 Zone DSC Translator	\$69 ea.	
	Wireless Motion Detector	\$229 ea.			GE Wireless Translator	\$69 ea.	
	Wireless Shock Detector	\$149 ea.			Honeywell/2 GIG Translator	\$69 ea.	
1	Wireless Smoke Communicator (Monitored Photo-Electric)	\$229 ea.	229.00		Powerline Adapter	\$149 ea.	
	Wireless Glass Break Detector	\$229 ea.			Hardwire Glass Break Detector	\$229 ea.	
	Wireless Carbon Monoxide Detector	\$229 ea.			Hardwire Door/Window Contact	\$129 ea.	
4	Emergency Pendant	\$129 ea.	516.00		Hardwire Indoor Siren	\$149 ea.	
	Wireless 2-Way Keypad (Impassa)	\$249 ea.			Hardwire Motion Detector	\$129 ea.	
	Desk Stand for Wireless 2-Way Keypad	\$40 ea.			Hardwire Smoke Communicator	\$129 ea.	
	Wireless Overhead Garage Door Sensor	\$149 ea.			Hardwire Touchpad (Power Series)	\$129 ea.	
	Variating Contact	\$149 ea.			Power Series 2 Way Voice Module and Speaker, 2 Ports	\$169 ea.	
	Wireless Indoor Siren	\$149 ea.			Door Lock <u>Brass</u> <u>Nickel</u> <u>Bronze</u>	\$229 ea.	
	Wireless Exterior Siren with Temp Sensor and Strobe	\$289 ea.			Lamp/Appliance Control	\$69 ea.	
	Wireless Flood Sensor	\$149 ea.			Thermostat	\$149 ea.	
	Repeater KIT	\$229 ea.					
					EC		358.00
					S		529.00
					DL		872.00
							INSTALL SUBTOTAL 13.00

DATE <u>2-17-15</u>	PURCHASER'S SIGNATURE <u>Glenn Lee</u>	SUBTOTAL	71.00
INSTALLATION DATE GIVEN <u>2-17-15</u>	INSTALLATION TECHNICIAN NAME <u>Nick</u>	2% TAX	6.93
DEALER LICENSE NUMBER <u>6722252</u>	SALES REPRESENTATIVE NAME <u>Nick</u>	TOTAL	77.93
		LESS DEPOSIT	105.93
		BALANCE DUE	0.00